

JOHN DICKINSON AND
DANIEL HUGHES:
TWO EARLY CAPE MAY COUNTY
PHYSICIANS

THELMA SMITH CRYDER

Trustee

Cape May County Historical and Genealogical Society
Cape May Court House, New Jersey

CAPE May County, the southernmost part of New Jersey, is bounded on the east by the Atlantic Ocean and on the south and west by Delaware Bay. The Tuckahoe River and Great Egg Harbor Bay are to its north. In 1800 it was largely cedar swamps and marshes, with two roads, one along the bay shore and the other along the ocean side, and a few horse trails through the bush to unite its 10 villages. Waterways were the best mode of travel. That year's population was 3,066, 98 of them slaves.¹

In the early days women took care of the sick. Midwives delivered babies and women gathered herbs for traditional remedies handed down from mother to daughter. Stevens' *History of Cape May County* states that 14 whalers and their families settled the county around 1658.² Their medications included boneset (an herb), goose grease, bread and milk poultices, and wild roots and herbs. Indians, notably friendly in southern Jersey, gave some information about local plants and medicinal herbs, and various "family doctor books" were popular, both in remote areas and areas closer to practicing physicians. The most popular of these was John Wesley's *Primitive Physic*, first published in America (Philadelphia) in 1764 and many times reprinted, "calculated for the use of families who have not the advantages of a physician, and accommodated to the diseases of America."³

Wesley's *Primitive Physic* documents the domestic therapy of the time: For consumption, boil two handful of sorrel in a pint of whey, strain and drink a glassful twice daily. For corns, apply bruised ivy leaves daily, and in 15 days the corns will drop off. For dropsy, apply green dock leaves to the joints and soles of the feet, changing them twice daily. For ringworm,

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apply rotten apples or pounded garlic. For shingles, drink sea water for a week and toward its close bathe in sea water or apply powdered garlic. For sore mouth, gargle with the juice of the cinquefoil. For a stitch in the side, apply treacle spread on hot toast; for venomous stings, apply honeysuckle juice. For wasp stings, rub the part with bruised leaves of house leek, watercress, or rue; apply treacle, sweet oil, bruised onions, or bruised garlic. For sunburn, wash with sage tea; for swollen tonsils, wash with lavender water; for warts, rub daily with a radish; for gravel, eat largely of spinach. To make hair grow, wash every night with a strong decoction of rosemary and dry with flannel. For wounded tendons, boil comfrey roots to a jelly and apply as a poultice, changing daily. To open a wound that has closed too soon, apply bruised centaury. For kidney stones (then an extremely common affliction), boil an ounce of common thistle root and four drams of licorice in a pint of water and drink half of this each morning.

JOHN DICKINSON

John Dickinson was born in Salem County in 1758.⁴ In 1777, aged 19, he was commissioned surgeon's mate in the United States Navy and immediately ordered to care for the sick and wounded on two vessels commanded by Captains John Rice and Ayres, part of the fleet under Commodore Hazlewood, at whose direction he fitted up a house on the Jersey shore, near Red Bank, as a hospital, serving there and in a hospital in Trenton for at least a year.⁵ In 1781 he married Mary Powers at Penns Neck, Salem County, and in 1786 moved to what is now Swainton, just a few miles north of Cape May Court House.⁶ They had nine children⁷ and their descendants are still scattered throughout Cape May County. Dr. Dickinson died at home in 1834, possibly a victim of his own treatment with mercury.

John Dickinson's ledgers tell us much about the man.⁸ Calls on horse-back north to Egg Harbor (25 miles), northeast to Maurice River (25 miles), and Dennis Creek (10 miles) demanded a rugged physique. Making several visits daily to a patient's house and often staying all day and all night showed his concern for his patients. Many physicians of the day could not support themselves by practice, and had other jobs. Cape May County records state that he was a county collector from 1805 to 1813, and that he was colonel of the Cape May militia in 1806. A loose leaf in his ledger reads:

Please pay to the bearer, Captain Nicholus Willits three dollars and sixty two cents part of the esiquit monies for a drum and fife for his company and oblige,

Yours,

John Dickinson

October 26, 1802⁹

The following also appears in his ledger:

Cape May Middle Township October 17, 1800 an agreement to raise money to repair the school house and purchase a stove, To wit Christopher Ludlam \$7, Nathaniel Holmes \$4, Seth Hand \$3, John Dickinson \$2, Jeremiah Hand \$2, Philip Stites \$2, John Eldridge \$2, Elijah Matthews \$2, James Sloan \$1, Robert Haney \$1, and further if the above sum should not be sufficient that all persons sending to school that is not named above shall pay 25c per scholar per quarter until the said deficiency is made up.

Midwives delivered most babies at that time, and he records few deliveries up to 1804. Perhaps the local midwife then retired or people began to want a physician at childbirth, because after 1804 he performed many deliveries.

Modern case histories tell the physician more about the patient than just his name; similarly, Dr. Dickinson used some of the following terms as identification: yankee, negro, captain, Esq., blacksmith, weaver, Upper Township, son-in-law, tavern keeper, Middle Township Poor House, carpenter, and deaf. He recorded the medicines he administered, but seldom recorded the diagnoses. The few exceptions include the following entries: extracting thorn from leg, 1 shilling; setting leg, 15s.; cutting off finger (Eli Corson), 15s.; setting boy's arm, £ 1, 10s.; amputating child's thumb, £ 1, 10s.; two sutures in child's lip, £ 1, 6s.; extracting corn from child's nose, 1s.; setting boy's thigh, £ 1, 15s.; getting bug from ear, 1s. 10 d.; inoculating four, £ 3. In 1800 he set Seth Hand's shoulder and in 1807 Nathan Hand's shoulder, charging each 1s. 10 d. Abscessed breasts were frequent, and he made many notations of "opening breast." He also recorded opening many tumors, but seldom noted their location.

His usual treatments included blistering, inoculating, purging, and bleeding—by far the commonest treatment. In 1821 he listed "75c for visit, bleeding and medicine for disy head." His drugs included calomel, barks, catholicon, cream of tartar, eye wash, flower of sulfur, gentian, glycerine, jaundice pills, liquorish, myrrh and aloes, nerve pills, pinkroot, paregoric, red bark, rhubarb, spirit of lavender, spirit of nitre, saline catharacin, tinch, and worm powder. His medicine chest survives in the Cape May County Museum; in addition to the usual bottles and instruments, it contains a lamp which used as fuel the dangerous mixture of

alcohol and turpentine which was popular between candle and whale-oil days.

During 1792 he saw 131 patients, and in 1802 made 509 visits. He drew teeth for one shilling each. He also recommended medicines for animals when requested, and in 1832 charged Henry Swain 12½c for medicine for his horse.

On August 26, 1799 Dr. Dickinson was invited to a medical society meeting in Woodstown, N. J., and in 1819 Cape May County had enough physicians to establish its own medical society¹⁰

DANIEL HUGHES

Daniel Hughes was born in Cape May in 1779; he was the grandson of Priscilla Leaming, a Mayflower descendant. He died July 3, 1815 at only 36 years of age.¹¹

In an 1803 case history of a sailor with hepatitis and able to return to duty in four weeks, Dr. Hughes' large and flourishing hand writes "so much for the invaluable medicine MERCURY, God grant I may always be successful in the event of my prescriptions and thanks to my beloved preceptor, Dr. Benjamin Rush." From this statement and the fact that he named his first child Benjamin Rush Hughes it is assumed that Daniel Hughes studied under Benjamin Rush; these are our only clues to his medical training.¹²

A logbook kept while he was surgeon on the ships *Ganges* and *America* from 1799 to 1803 recorded sailors' ailments as sore legs and hands, back injuries, concussions, colds, rheumatism, venereal diseases, and kidney complaints. He described the pulse as low, raised, tense, or normal. A combination of gruel and wine was often administered. Frequently he sweated his patients, using sage tea and pediles, and on some occasions he administered opium pills.¹³

Dr. Hughes began private practice in lower Cape May County in 1809, and headed his first ledger "July 21, 1809 Recipes Book and Commencement of the Practice of Physic in County of Cape May." He kept a very neat and complete ledger. The left side lists the patients—their complaints, medication, condition, and progress and the amounts paid him in dollars and cents. The right side lists money paid for the upkeep of his family, home, and grounds.

Almost all his patients were seen at their homes. For regular visits he

charged 50c and at night generally \$1.50. He once charged \$4 for staying from 4 P.M. one day until 4 P.M. the next. Fifty cents seemed to be the set fee for bleeding a patient. Charges for drugs ranged from 8c to 53c, but seldom more. He usually charged 25c for drawing a tooth, but one patient's socket hemorrhaged and he charged 25c for the extra visit. He accepted a bushel of potatoes for drawing Lannery Hughes' tooth, but his ledger has little evidence that he accepted much barter for his services. Midwives delivered most babies and he records no confinements. From July 21, 1808 to July 21, 1810 he made 198 visits to patients: 74 women, 65 men, and 59 children.

Only twice did he omit a patient's name in his records. On June 21, 1814 he wrote: "visit toin the bush. Received 1 French Crown in the buses at the Cross Roads." Then, on June 23, 1814, "Visit to....in the bush, 8c." The French crown received in payment suggests that a pirate vessel may have landed an ailing patient; he may have tended a fugitive slave, or there may have been a duel.

He treated a wide range of diseases: swelling and watery rupture of the scrotum (John Izard's infant), condylomata and fever, hysteria, convulsive state of fever, spasm of the lower belly, nephritis, splenitis, colds, many cases of worms, internal fever, poisoning by Rhus, chronic pain in the head, abortion, whooping cough, profuse night sweats, roundworms, severe pains in the back and abdomen, pain in the region of the liver, caries of the tibia, epistaxis, syphilis, hypochondriasis, rheumatism ("rheumatic"), gravel, cholera, vomiting, ophthalmia membranorum, glandular tumors on the neck and inguinal region, crusta lactea, vertigo, induration of the parotid gland and side of neck, pneumonia, bruised testicle, inflamed breast and sore nipple, convulsion, chronic dysentery, and dropsy.

Miscellaneous minor surgical procedures included contusion of the foot, ulcer of the leg, operation upon an ear (50c), setting a fractured clavicle, extracting a cherry stone from a child's nose, and extracting coffee grain from a child's nose. He most frequently gave the following drugs: bark of sassafras boiled in milk and thickened with meal, bark, bark with wine, castor oil, Godfrey's cordial, gruel with wine, opium pills, various powders, sage tea, alcohol, tincture of asafetida, and Turlington's balsam. He described patients in the following terms: better, brave, bravely, continues worse, continues the same, little better, dying, mending slowly, or not well, and described their conditions as chills and fever, pain not so violent, the same very ill, or worse.

MENINGOENCEPHALITIS

Dr. Hughes' ledger notes the frequency with which he visited seriously ill patients, often morning and evening, sometimes staying through the night. The following ledger account describes a child's fatal illness.

Sunday, January 20, 1811—Visit to Woolson child, ill: Tense pulse, intermitting after 3rd and 7th and 10th stroke. The tongue was dry and black. There was violent pain in the forepart of the head. Bowels were painful. Prescribed bottle of Godfrey's Cordial.

January 21—Visit to Woolson child, ill: Pulse intermitting after 3rd, 2nd, and 5th stroke. Tongue red in the center with edges white and sloughy. Violent pain in his eyes and forehead. He discharged one stool black and one dark greenish color. Picks his nose and tongue. Eyes are swelled over each lid. Complains of pain in his bowels around the navel. Feet and hands have been cold during the whole of this day. Ingestions of thin gruel have been given every two or three hours. Mustard plasters are being applied to his feet.

January 22—Visit to Woolson child, ill: Ingestions of gruel continued. Pulse quick and regular, without [illegible] as in the third stage of the disease. Acute pain in the forehead, eyes, and top of head. Looks more out of his eyes than he did yesterday.

January 23—Visit to Woolson child, little better.

January 24—Visit to Woolson child, ill.

January 25—Visit to Woolson child, little better. He seems to have less pain in his head but coughs much, rosy cheeks. Pulse quick and full, sleeps tolerably well. Is very cross and retains his faculties perfectly. Has constant eructations of wind from his stomach, particularly after taking drink of any kind. Voids his urine freely and of sufficient quantity and healthy color. Continue the clyster with a spoonful of bark in wine when restless. Also the coffee chocolate with biscuit boiled in it. The pupils I have not observed to be any way dilated.

January 26—Visit to Woolson child, little better. Pulse quick and soft. Complains of pain in head. Tongue moist and red. Has discharged 7 large worms, 2 of them were dead. Continue the clysters and have the belly rubbed with equal parts of asafoetida and [illegible]. Rx continued as yesterday—chocolate coffee with biscuit boiled in it.

Sunday, January 27—Visit to Woolson child, very ill: The blisters were applied at 8 this morning. Have not drawn. Great pain in head. Keeps his eyes constantly in motion with the eyes turned upwards. Pulse weak and quick. Discharged his stools involuntarily twice this morning. Has constant belching of wind from his stomach and when it subsides a very troublesome loose cough comes on. Constantly picks his nose and sometimes grates his teeth. Head feels very hot.

January 28—Visit to A. Woolson's child, ill. Lays in a comatose state. Applied blisters to his wrist. Discharged his stools involuntarily and rejected the clyster immediately. Pulse slow—intermitting and at times quick.

January 29—Visit to A. Woolson's child, very ill. Lays comatose—left pupil insensible to light and lost its power of vision. Pulse low, quick and intermitting after 3rd and 5th stroke. Retains its clysters. Blisters discharged—still sensible to the irritation of dressing them. Retains his senses tho quite deaf. Medicine continued.

January 30—Visit to A. Woolson's child, a little better: He is more sensible to the light

this morn and hears better. Has his senses. Blister discharges freely. Takes his nourishment very well.

January 31—Visit to A. Woolson's child, dying.

February 1—Visit to A. Woolson's child, supposed to be dying.

February 2—A. Woolson's child died, aged 4 years and 4 months.

A PULMONARY STATE OF FEVER

On July 22, 1809 Dr. Hughes was called to see Henry Pearson, who was suffering with what was described as "a pulmonary state of fever." He returned on the 24th, 27th, and 30th. Calomel was given with no effect, and on the 30th Dr. Hughes directed him to take dilute nitric acid, three drams twice daily. When he returned on August 2nd he prescribed flowers of sulfur, cream of tartar and continued the nitric acid. On the sixth of August the patient complained that the acid disagreed with him. He was told to stop the acid but to continue the laxatives. On the ninth he was told to continue to omit the acid. On the 12th Dr. Hughes gave him more medicine and something to take when the cough became troublesome. On the 16th the patient was about the same. His pulse was regular and small, he still coughed a great deal and had spat much the previous night, but he had no more sweats. His fever was very trifling and his appetite good. He was told to continue the bark, the pectoral mixture, and the laxative pills.

On August 19th he was a little better; the bark and pectoral julep were continued. August 26th found the patient mending slowly, but on the 31st he took a turn for the worse with chills and fever. On September 11th he remained much the same. The bark was discontinued because it disagreed with him, but the opium pill at bedtime was continued. The patient had been ailing since July 22nd, so on October 1 Dr. Hughes called Dr. Robert C. Schenk in for consultation. The diagnosis was nephritis. Dr. Hughes returned that morning and again at three o'clock in the afternoon. On October 5th the patient was not well, and had taken cold. Dr. Hughes gave him his opium pill, for which he paid. On October 8th syrup of squills (3 js.) was ordered. The last recorded visit was on October 21st, three months less a day from the time Dr. Hughes was first called.

PARAPHIMOSIS AND CHANCRE

On April 13, 1811 Dr. Hughes visited Hand Stites. He returned on the 18th and diagnosed paraphimosis and chancre. When he saw the patient on the 19th and 20th the penis was greatly inflamed and swollen. That

evening he applied poultices of bread crumbs, vinegar, and sugar of lead. The next day he called Dr. Schenk in for consultation; Dr. Schenk made two incisions in the foreskin, extending from the corona to the beginning of the constricting band. The swelling immediately subsided considerably. Dressings of cerate and lint and a warm poultice were applied. The patient was given an opium pill to take at bedtime. Dr. Hughes called on the 23rd to dress the chancre, which looked much cleaner, with the swelling much abated. The patient had slept well the night before.

Dr. Hughes dressed the area on the 23rd and 24th, but on the 24th he found the surface underneath "much swelled" and the chancre "deep and foul." Other ulcers appeared on the glans penis. The incisions were healing and the constriction above the glans—which was ulcerating and discharging matter freely—was tight. He touched the chancre with caustic, dressed it with stronger mercury ointment, and continued to dress it each day. On the 27th he noted that the healing chancre looked better but that the inferior surface of the glans was much swollen. The constriction was not sufficiently relaxed and he thought another incision should be made. The following day he and Dr. Schenk opened the swelling in two places, and the chancre was dressed with calomel ointment. On April 29th Dr. Hughes made two visits to Mr. Stites. The swelling had subsided a little and the chancre looked clean, but the mercury was affecting the patient's mouth.

The next day Dr. Hughes made two visits. In the morning the surface was quite swollen, so he returned in the evening to dress the incision and to encourage drainage. The chancre looked clean and was healing around the edges. He returned to dress the incision each of the following three days and ordered warm poultices twice daily of the inner bark of sassafras boiled in milk and thickened with fine meal. He continued to dress the incision daily for a week, and again called in Dr. Schenk, who ordered lint dipped in water applied to the swollen surface and incisions. After two days of these applications the swelling subsided and felt soft, and the skin was more wrinkled.

Dr. Hughes continued the dressings each day for a week, and then called Dr. Dickinson of Cape May Court House in for consultation. They gave the patient two enemas every two hours, but the delirium continued. The tongue was furred and dark yellow, the pulse was soft and, at times, full and quick. The next day Dr. Hughes visited the patient in the forenoon, afternoon, and evening. On July 4th, the following day, he

stayed all day and on the fifth made two visits. On the sixth he again stayed all day, giving the patient three enemas and bark and wine every two hours. The patient continued delirious, with a frequent quick pulse. The next day the doctor remained all morning. The patient's delirium continued, but was less violent. His pulse was quick and small and his tongue dark, with a crust in the middle, with red edges. His skin was moist, and at time he sweated profusely. He sighed less than before. On July 8th the patient was weak and delirious with a full, quick pulse, but was sweating less than before. Dr. Hughes stayed all forenoon. On the ninth he stayed all forenoon and left the patient sleeping soundly. On the tenth the patient was so ill that Dr. Hughes stayed all day. On the 11th he again remained with him all day but left him dying.

PREPARTUM UTERINE HEMORRHAGE

On February 9, 1813 Dr. Hughes was called to see Millar Bancroft's wife. She was pregnant and had a uterine hemorrhage, so he attended her all night and charged \$2. He prescribed 30 drops of laudanum each hour. He was called again the next night, and he ordered a cordial anodyne and charged \$1.50 for the visit. He was called back that same night and gave her sulfur alum, potassium nitrate, and bulb of calumba. He also called Dr. Schenk to help manage her uterine hemorrhage. The next day her condition was better, but Dr. Hughes ordered the medicines repeated as before and charged 75c. He visited her on the 14th, and charged 50c for the visit and 16c for the medicine. She complained that the powders caused cramps, so they were omitted for a while and the dose was then cut in half.

On the evening of the 15th he visited her again and prescribed tonic powders of potassium nitrate, alum, and bulb of calumba, for which he charged 36c. He also prescribed anodyne drops (12c plus 50c for the visit). On the 17th he visited twice, finding her better on the second visit. He charged 60c for the visit, plus 6c for cream of tartar and 8c for other medicine. On the 18th he charged 50c for the visit, plus 12½c for one medicine and 6c for the other. That day he noted in his ledger in parentheses "discharged me." Doubtless, like all physicians, he understood the whims of pregnant ladies and directed his horse toward her home the next day. He charged 75c for that visit, 18c for one medicine, and 37½c for another. At 10 P.M. that night, February 19th, Dr. Schenk delivered Mrs. Bancroft's baby. The following day Drs. Hughes and Schenk visited Mrs. Bancroft together. Dr. Hughes charged \$1 for his visit and 12½c for

two ounces of sweet niter and lavender compound. For 12 days Mrs. Bancroft had the regular attention of her physician and a consultant, and was brought to a successful term delivery.

HYSTERIA

On June 23 1812 Dr. Hughes was called to treat Patty Church for hysteria. He gave her spirit of niter, spirit of ether, lavender compound, and spirit of seri, and suggested that if hysteria came on again she should take cardamon and potassium nitrate. He visited her daily for the next five days and then did not see her until 17 days later, when J. Eldridge, Overseer of the Poor, asked that he visit her. At that time he gave her calomel pills and antihysterical drops, for which he charged 25c plus 50c for the visit. He visited her five more times during July, and at one visit again prescribed antihysterical drops and doubled the price, from 25c to 50c. During August he made seven visits, one at night. He visited her twice more, on August 30th and September 7th.

VACCINATION

Dr. Hughes believed in vaccination. On May 8, 1810 at 7 A.M. he vaccinated Fisher, his youngest son, aged four months. He vaccinated his medical apprentice at the same time, but this did not take. The following day he vaccinated his oldest son, Rush. May 16 was the eighth day of Fisher's vaccination and the seventh of Rush's. The vaccinal pustule was complete in both their arms. The areola on Rush's arm began the sixth day, and on the seventh was half an inch in diameter from the center of the pustule; the red lymphatic affection had occurred in the axilla, with pain and slight swelling of the axillary lymph nodes. The circumference of the pock was much heated and accompanied by great itching and surrounding hardness. On the eighth day of Fisher's vaccination the efflorescence began to appear. The pustule was "beautiful" and felt a little indurated. On June 23, 1814 at 7:20 A.M. Dr. Hughes vaccinated himself on the left hand between thumb and forefinger with one puncture, but did not note whether this was successful.

WHOOPIING COUGH

On February 6, 1810 Dr. Hughes visited Mr. Williams' child, who had whooping cough. He prescribed rhubarb and cream of tartar, and sug-

gested that if the first dose did not operate in four hours, cream of tartar was to be used, two drams in solution. He returned that night to check and prescribed elixir of paregoric. The following day the child was better, but the day after that the child was less well, and running a fever every day. Dr Hughes prescribed one dose of senna and manna, syrup of squills, and two assafoetida pills. When Dr. Hughes called on the ninth he thought that the child was better. The patient had sweated some, and his bowels were open. Dr. Hughes prescribed spirit of niter and other medicines. He returned the same evening because the child became quite ill, was comatose, and had a sore mouth, but the following day the child was better and he dressed the patient's blisters. Syrup of squills was prescribed, to be repeated on the eighth and ninth days. The child continued to improve, and on February 18th Dr. Hughes visited him for the last time, noting in his ledger "better—discharged one round worm."

SCROFULA

On September 2, 1810 Dr. Hughes was called to see a swelling on the hip of Nancy Bennet's child. He ordered a poultice and washes of wormwood and vinegar every two hours. The next day he noted that the child had a "scrofulous affection" with a glandular tumor on the neck and that the inguinal lymph nodes were enlarged. He ordered applications of wormwood and sal ammonia as discutients, dissolved in vinegar, and that the parts be washed with this solution. Dr. Hughes visited the child on the fifth, and when he returned on the sixth the swelling on the hip had increased and he could palpate matter inside it. Again he ordered soft poultices to bring on suppuration. On the seventh he ordered the poultices continued, and on the eighth he ordered them applied every two hours. After seven days of poultices without satisfactory results he decided to open the abscess, which he did on Sunday the ninth. He returned each of the following two days to dress the wound.

PUERPERAL FEVER

On February 12, 1813 Dr. Hughes visited George Stites' wife, who was "in puerperal state of fever." His fee was \$1.50, and he ordered 48 pills of phoei and gal, for which he charged 20c, and half an ounce of carminative mixture (lavender, essence of peppermint, and spirit of niter) for 12c and cream of tartar for 10c. He returned the next day and found that the purges had operated well, but that her breath was quick and heavy,

with a frequent quick pulse. That afternoon she had a chill followed by a fever. He gave pills of aloes and myrrh (37½c), an ounce and a half of anodyne julep (25c), and charged \$1.25 for the visit. When he returned on the 14th she was better and had rested well the night before. She had a little fever, but her pulse was weak, frequent, and quick. He charged \$1 for this visit and 20c for medicines. On the 15th he found her with more fever and some costiveness. He gave her cathartics, compound of niter, camphor, and colombo (30c) and a mixture of spirit of niter and lavender (8c). On February 16th he was called during the night, but the following day she was better and his last visit is recorded on the 18th.

SUMMARY

Very early in the 19th century Cape May county was fortunate enough to have two conscientious physicians whose ledgers document that their practice did not differ from that in Philadelphia or New York. Their fees were, by the prices of those times, standard, and some bills were paid from tax funds by the Overseer of the Poor.

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